

## STATE OF NEW HAMPSHIRE

# 2017 Statement of Income and Expenses for LOBBYISTS

(RSA Chapter 15)

RECEIVED FEB 0 9 2018 NEW HAMPSHIRE DEPARTMENT OF STATE

PLEASE PRINT

. Name of Lobby	st(s)	Dawn E. M	AcKinney	<u> </u>	
II. Name of lobby	st's partne	rship, firm o	corporation, if a	ıy:	
New l	Hampshire	e Legal Assi	stance		
		nership, firm or			<del></del>
117 N	Jorth State	Street	Concord	NH	H 03301
Business Address:	(Street)		(Town/City)	(Stat	
( ) 603-224	-4107	(	) 603-223-97	94 e-mail	dmckinney@nhla.org
(Telephon	e)		(Fax)		· · · · · · · · · · · · · · · · · · ·
			not attributable to		ative to the following client:
OR	(Full Na	ame of Client a	it appears on the Lo	bbyist Registration For	n)
			t (including the lob	byist's family), or the	blobbying firm listed below which
IV. Date of Repor Reports cover: a		26, 2017 🗌 late of registrat	ian ta 3/31/17	July 26, 201 activity from 4/1/17	
keporis cover. a		er 25, 2017		January 31,	
		om 7/1/17 to 9		activity from 10/1/1	7 to 12/31/17
If this box is checked Concord, NH 0336  VI. Check if addit  If you have recently lifty in the content of the	ed, complete I.  ional repor eived fees o d an honora ement	just this form ts are attacher made expen rium or reimb	and submit it to the ed: ditures, you must for the order of the order	e Secretary of State's ile <b>Addendum A</b> – Fe u must file <b>Addendu</b>	e since the last report.   To Office, State House, Room 204,  ees and Expenses  m B- Report of Honorariums or  Addendum C- Political Contribut
Sworn Statement/ I have read RSA 1: and complete to the Signature of lobb Dawn E. M	s, RSA 15-B best of my yist)	, RSA 14-C a	nd RSA 664 and h		that the foregoing information is t $\frac{1-18}{\text{(Date)}}$

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# STATE OF NEW HAMPSHIRE



### Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

I. Name of Lobbyist(s)	Dawn McKinney	·		
H. Name of lobbyist's partnership, firm or corporation, if any:				
New Hampshire Legal Assistance				
(Name of partne	ership, firm or corporation)	,		
III. Name of Client	N/A		Date	
IV. Fees Received Indicate the gross amount of a to lobbying, including fees for including research, monitoring reduced by any expenses:	services such as public	advocacy, governmen	t relations, o	r public relations service
a) Total of all fees received in	this reporting period		a) \$	0
b) Total of all fees received the (This should equal the total				0
c) Total of all fees received to (Add lines a and b)	o date		c) \$	0
d) Indicate the amount of any yet been paid	such fees that are due, bu	t have not	d) \$	0
V. Expenses: Lobbyist(s)/Lobbying partners fees. Separate reports are to be the lobbyist(s)/firm that are to Expenses are to be reported i during the reporting period for individual expenses where the lunch where the cost was \$25. being lobbied, purchase of a c (c) an itemized statement of ea any purpose not covered by ( ceremonial object to be given restaurant expenses for a legic contributions will be reported of	be filed for expenditures a inrelated to any one clie in one of three categories or salaries, benefits, supple expenditure was of \$25. 00 or less, purchase of a eremonial object given to ich individual expenditure (a) (for example: purchase to the subject of lobbying slative reception). Expe	made relative to each nt a separate report of expenses: (a) the ort staff, and office e 00 or less (for exampen with a value of less a person being lobbit made during this repe of a meal with value great nses for honorariums	client and if may be filed e aggregate expenses; (b) ole: meals pu ess than \$10 ed with a val orting period ue of greates er than \$25, s, expense re	expenditures are made if for the lobbyist(s)/fir total of all expenses pathe aggregate total of rchased during a busine that is given to the person ue of \$25.00 or less); a of greater than \$25.00 or than \$25, purchase of but not greater than \$3 imbursement, or politic
<ul><li>a) Total aggregate expenses for support staff, and office expension</li><li>b) Total aggregate of expendit</li></ul>	ses, related directly or ind	irectly to lobbying.	a) \$	2,996,88
in a), of \$25 or less.	and topotime	Parion, mor reported	b) \$	<u> </u>
c) Total of all itemized expend	ditures reported in detail i	n section VI.	c) \$	$\mathcal{O}$

d) Total expenses for this reporting period (Add lines a, b and c)	d)\$ 2,996.88
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	d) \$ 2,996.88 e) \$ 21,885.61 f) \$ 24,881.89
f) Total of all expenses year to date	f)\$ 24, 881.89
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from loperiod, including by whom paid or to whom charged.	
Paid to:	Amount:
	\$
	\$
	\$
	\$
	\$
	\$
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm is true and complete to the best of my knowledge and belief.	n that the foregoing information
(Signature of lobbyist)	2-4-1F (Date)
Dawn McKinney (Print Name of lobbyist)	

#### STATE OF NEW HAMPSHIRE

**Lobbyists Report of** Political Contributions Addendum C (RSA Chapter 15:6)

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NEW HAMPSHIRE

•	I. Name of Lobbyist(s)	Dawn	MK	nney	W. 1 1/4 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	NEW HAMPS!
A E	II. Name of lobbyist's par Name of par III. Name of Client	rtnership, firm Hamp tnership, firm or ko	n or corpor	ation, if any:	ASS 5 Date 2	tance -4-18
ì	Political Contributions For each political contributions client/lobbyist and lobbyi				oter 664 paid or	behalf of the
	Full name of candidate: _	(Last Nat	UWV me)		_	
	Amount of contribution \$  If the contribution is an in-k actual cost of the in-kind con enter an estimated value and	ind contribution atribution on the	line above fo	Office Candidate in Scription of the good or amount of contributions.	ls or services pro	ovided, and enter the
ļ		*-				
	Full name of candidate:	(Last Na	me)	(First Name)	(Middle N	ame/Initial)
	Amount of contribution \$ _			_		
	If the contribution is an in-k actual cost of the in-kind cor enter an estimated value and	ntribution on the the word "estin	e line above fo nate."		ution. If the act	
I					: 	
	Full name of candidate:	(Last Na	me)	(First Name)	(Middle N	ame/Initial)
	Amount of contribution \$_	<u></u>		_		

(If more than three contributions were made, report addition	onal contributions on separate addendum C forms.)
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and is true and complete to the best of my knowledge	nd hereby swear or affirm that the foregoing information ge and belief.
(Signature of lobbyist)	2 - 4 - 18 (Date)
DAWN MCKINNEY	(Date)